

Access to Recovery (ATR) Highlights Quarterly Profiles

WASHINGTON DC ATR HIGHLIGHTS

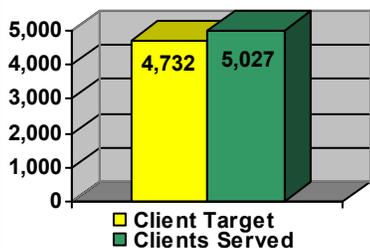
Program at a Glance

3-Year Total Grant Amount: \$10,392,756

Target Population: Persons re-entering the community after being incarcerated, women, women with dependent children, young adults and methamphetamine users

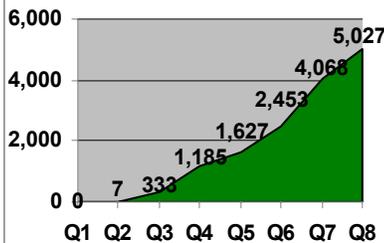
Target Areas: District-wide.

Client Target vs Clients Served - D.C.



SAIS: September 30, 2009

Cumulative Count of Clients Served by Quarter

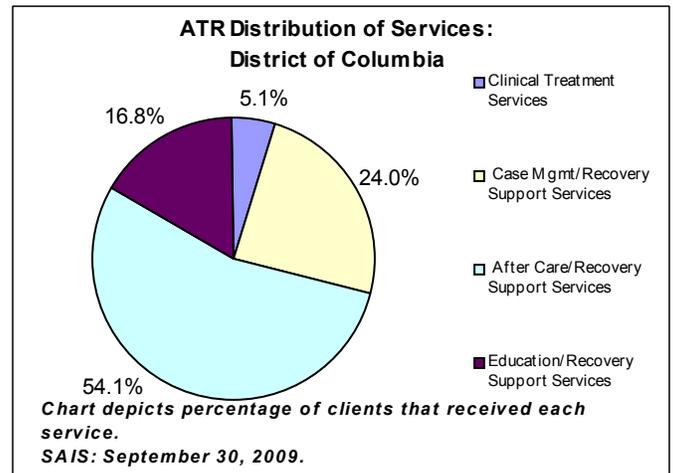


SAIS: September 30, 2009

DC CORE Continues Upward Trend in Enrollment

The District of Columbia's Choosing Options for Recovery and Empowerment (CORE) ATR spans all eight wards of the Nation's capital. The program targets persons re-entering the community after being incarcerated; women, including those with dependent children; youth and young adults; and methamphetamine users.

Recovery support services (RSS) are the main focus of the DC CORE program and comprise more than 90% of total services provided. SAIS distribution data show that after care support, the most utilized service at 54.1%, made up more than half of total services. Case management (24.0%) and education services (16.8%) comprised the remaining RSS. Clinical treatment



services accounted for 5.1% of all those provided. The project served 5,027 clients this quarter, surpassing its target of 4,732. This represents a significant increase over last quarter's total enrollees. The staff's outreach to opioid users through advertisements and efforts to forge new strategic partnerships continues to positively impact enrollment.

Follow-up with participants after their discharge from the program has shown that DC CORE is affecting its clients in a positive way. The rate of abstinence from use at discharge increased by 10.8%, as measured by comparing data at intake.

DC Builds on Successful Recruitment Strategies

During this quarter, DC CORE built on its growing enrollment success by again meeting its client target as well as by increasing client participant in recovery support services.

The effective use of city-wide community Outreach Teams and the strategic

placement of flyers and brochures in areas of high risk for methamphetamine users were major factors in the project's growth. Staff also participated in community forums in each of the 8 wards within the District.

Although the GPRA follow-up rate is below 80%, DC

CORE has added positive new features to increase retention rates, including providing transportation for clients to bring them to their interviews at the central office and scheduling convenient interview locations on multiple dates for opioid clients.

DC Builds on Successful Recruitment Strategies (CONT.)

The Outreach Team has developed strategic plan to assist locating hard-to-find clients.

amphetamine or methamphetamine abuse will be referred to DC CORE for clinical treatment services. These efforts have already paid dividends in increased client recruitment.

services to its clinical service array and increasing community outreach and marketing efforts.

The DC CORE has strengthened its partnerships with other programs, including DC courts and government human service agencies as well as private clinics and networks, to ensure that people who present with

DC CORE is looking to the future with plans for instituting a new electronic client intake and billing system, increasing clinical treatment and residential

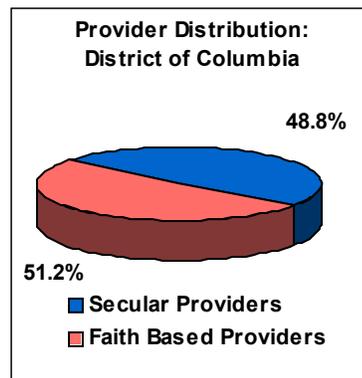
Program Contacts	
Project Name:	DC Choosing Options for Recovery & Empowerment (DC CORE)
Project Director:	Valerie E. Robinson (202) 727-9032
Government Project Officer:	Roula Sweis (240) 276-1574
Single State Authority:	Tori Fernandez Whitney (202) 727-8941
Mayor:	Adrian Fenty (202) 727-2980

“Because of ATR, I know things are better than they used to be and can only get better.”

Faith- and Community - based Provider Updates

Based on the data ending September 30, 2009, 51.2% of the providers that have received and redeemed vouchers were faith-based organizations, a 1.2x% increase from last quarter. 48.8% of redeeming providers were secular.

ongoing training and onsite technical assistance to all CORE Providers on how to increase the GPRA follow-up by utilizing client discharge procedures, the client locator, the client program referral voucher, client verification of services forms, and client services billing process. CORE anticipates that these efforts will aid them in meeting their GPRA target.



SAIS: September 30, 2009

During the quarter, CORE facilitated a two-day SAMHSA-sponsored training on the MATRIX Model to ATR network providers. They also continued to provide

Success Story: ATR Helps Wade Turn His Life Around

Wade, a DC CORE client, tried to recall when and why his addiction began, but he says, “I’ve tried over and over and still cannot put my finger on why I began to get high except for the fact that I wanted to fit into my new neighborhood.”

Yet with this upbringing, Wade managed to take his first drink and smoke his first marijuana cigarette by age 12.

He says through ATR, he was able to enroll in job readiness programs and obtain his GED. Today, Wade is a high school graduate, celebrating sobriety and his new journey to recovery. “Because of ATR, I know things are better than they used to be and can only get better.”

Wade says he was raised in a strong, close-knit family with Christian values. His says his family was disciplined firmly, but lovingly.

His drug use escalated until he eventually dropped out of school. He later became enrolled in ATR when he realized he had completely lost control over his life.